SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: 	B. Received by (Printed Name) C. Date of Delivery 7-15-12 D. Is delivery address different from item 1? Yes
JEREMY FULLER GOT NAMED INC 1174 E ELECTRA LN	If YES, enter delivery address below:
SANDY UT 84094	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
AB 9/12/2012 S023006/	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number	llo 0001 3568 3780
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-154

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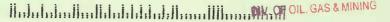
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City, State, ZIP4

JEREMY FULLER GOT NAMED INC 1174 E ELECTRA LN SANDY UT 84094

PS Form 3800, August 2006

See Reverse for Instructions